



**WOHNEN  
FÜR  
STUDIERENDE**

**SEPA DIRECT DEBIT MANDATE**

Mandate reference: Accomodation Fee

Recipient

WIST OÖ

J.W. Kleinstraße 72

4040 Linz

Account: AT96 5400 0000 0022 8437

I / We authorise WIST OÖ to collect payments from my / our account by SEPA direct debit. At the same time, I / we instruct our credit institution to honour the SEPA direct debit mandate drawn on my / our account by WIST OÖ. I / we can demand reimbursement of the debited amount within eight weeks, beginning with the debit date. The conditions agreed with my / our credit institution apply.

Name of Tenant: \_\_\_\_\_

Accomodation: \_\_\_\_\_

Name of Account Holder: \_\_\_\_\_

Adress of Account Holder: \_\_\_\_\_

IBAN: \_\_\_\_\_

BIC: \_\_\_\_\_

\_\_\_\_\_  
Place, Date, Signature Account Holder

*For internal use only:*